DECLARATION FOR UTILITY OR

amended by any amendment specifically referred to above.

Dalah

PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

C+ 1 ***

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorn y Docket Number

	DESIGN	First Named Inventor	Silva, Kaiph					
	PATENT APPLICATION	COMPLETE IF KNOWN						
	(37 CFR 1.63)	Application Number						
	☑ Declaration ☐ Declaration	Filing Date						
	Submitted OR Submitted after Initial	Group Art Unit						
	with Initial Filing (surcharge Filing (37 CFR 1.16 (e)) required)	Examiner Name						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
	As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated b	pelow next to my name.						
	Improved Cable Feeding Device							
	(Title of the Invention)							
the specification of which								
	☑ is attached hereto							
	OR as United States Application Number or PCT International							
	LJ was filed on (MM/DD/YYYY) (if applicable).							
	Application Number and was amen	ided on (MM/DD/YYYY)						

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified C	opy Attached? NO	
None			0000	0000	0000	

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	J
None		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box

TO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR + Correspondence address below							
Name Steven W. Webb		-					
Address Law Offices of	Steve	n W.	Webb				
Address 655 Second Street							
City Encinitas				State	CA	2IP 92024	
Country USA],	Telephone	760	-635	-7530	Fax 760-635-7531	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INV	ENTOR:			A petiti	on has been fil	ed for this unsigned inventor	
Given Name Ralph Family Name Silva or Surname							
Inventor's Signature Date							
Residence: City Spring Va	lley		State C	A (Country USA	Citizenship USA	
Mailing Address PO Box 50	07						
Mailing Address							
c ity San Diego	State (CA		zip 92165 Country USA		Country USA	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Family Name or Surname							
Inventor's Signature Date							
Residence: City			State Country		Country	Citizenship	
Mailing Address							
Mailing Address							
City State ZIP Country				Country			
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

PTO/SB/09 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

- -- A

STATEMENT CLAIMING SMAI (37 CFR 1.9(f) & 1.27(b))-INDE	Docket Number (Optional)						
Applicant, Patentee, or Identifier. Ralph Silva							
Application or Patent No.:	Application or Patent No.:						
Filed or Issued:							
Title: Improved Cable Feeding Device							
As a below named inventor, I hereby state that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:							
x the specification filed herewit	x the specification filed herewith with title as listed above.						
	the application identified above.						
the patent identified above.	the patent identified above.						
I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).							
Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:							
No such person, concern, or organization exists.							
Each such person, concern, or organization is listed below.							
Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27) I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any							
maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))							
Ralph Silva							
NAME OF INVENTOR NAME OF INVENTOR							
Signature of inventor	Signature of inventor Signature of inventor						
Date Date							

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.